FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		RGANIZA		J							
		(See instructions	s)					Office use	only		
1. NAME OF COMMITTEE (ii	ı full)	(Check if name is changed)		ole: If typying, ne lines	type	12FE	4M5	1 1			
Rolls-Royce	North America Ho	ldings Inc. PAC (I	Rolls-Ro	oyce North	America	a 					Ш
									ш	ш	Ш
ADDRESS (number and	d street)	Explorer Street,	Suite 20	00		ш					Ш
X (Check if add is changed)	dress Rest	on 				L YA	L	20	1 90		Д Д
		(CITY			STATE.	^	2	ZIP CODE	≣ ▲	
COMMITTEE'S E-MA		_									
Anna.vazque	z@rolls-royce.con	<u> </u>									
										Ш	
COMMITTEE'S WEE	B PAGE ADDRESS (U	RL)									
									ш		
											Ш
COMMITTEE'S FAX	NUMBER										
با لبنا	ــــا لــــ	J									
2. DATE M	6 20 Y	2008									
3. FEC IDENTIFIC	ATION NUMBER	C	C002	96822							
4. IS THIS STATE	MENT NEW	/ (N) OR	X	AMENDE	D (A)						
I certify that I have exar	nined this Statement and	to the best of my know	ledge and	belief it is true,	correct and	d complet	е				
Type or Print Name o	f Treasurer	Anna Vazquez									
Signature of Treasure	er Electronically File	d by Anna Vazqı	Jez			Date	0 6	/ D	20 / Y	ž 0	° 8 0
NOTE: Submission of t	alse, erroneous, or incon	nplete information may s							S.C. S437	7g.	
Office Use Only			F	For further info ederal Election oll Free 800-4 ocal 202-694-	n Commissi 24-9530				C FOR		

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5.		OF COMMITTEE (Check One) ate Committee:	
	(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete t information below.)	he candidate
	Name of Candida		
	Candida Party Aff		State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candida		
	Party Co	ommittee:	
	(d)	(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	Political	Il Action Committee (PAC):	
	(e)	X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
		X Corporation Corporation w/o Capital Stock La	bor Organization
		Membership Organization Trade Association Co	ooperative
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	d fund or party
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Joint Fu	Indraising Representative:	
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	(Committees Participating in Joint Fundraiser	
		1. FEC ID number	
		2. FEC ID number	
		3 FEC ID number C	
		4 FEC ID number C	
		FEC ID number C	

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Write or Type Committee N	ame			
Rolls-Royce North	America Holdings Inc. PAC (Rolls-I	Royce North America PAC)	
6. Name of Any Connect	ed Organization, Affiliated Committee, Le	adership PAC Sponsor or Join	t Fundraising	Representative
Rolls-Royce North	America Holdings Inc.			
			<u> </u>	<u> </u>
Mailing Address	1875 Explorer Str	eet, Suite 200	<u> </u>	
, and the second	1			
	l Destar			20100
	Reston	<u> </u>	1	20190
	CITY	STAT	ΓE ▲	ZIP CODE
Relationship:				
X Connected Organia	zation Affiliated Committee	Leadership PAC Sponsor	Joint Fun	ndraising Representative
	: Identify by name, address, (phone in nittee books and records.	number optional), and pos	sition of the po	erson in
. 	nna Vazquez			
Full Name	10== = 1 0:			
Mailing Address	1875 Explorer Str	et, Suite 200		
	Reston		<u> </u>	20190
Title or Position ♥	CITY	CT A.	TE A	ZID CODE A
Treas	CITY A	STAT	703 –	ZIP CODE A 621 - 2723
		Telephone number		
O Turanaman Link the a	name and address (phone number o			
	of any designated agent (e.g., assistan		ie committee	, and the
E II Nove				
Full Name of Treasurer A	nna Vazquez			
Mailian Andresa	1875 Explorer Str	eet. Suite 200		
Mailing Address		<u> </u>		
	Reston	V	A	20190 –
Title or Position ♥	CITY A	STA	TE A	ZIP CODE A
Trea	surer	- : :	703	621 _ 2723
		Telephone number		

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Full Name of Designated Agent	Susan Ralph		
Mailing Address	1875 Explorer Street, Suite	200	
	Reston	VA	20190 –
Title or Position ▼	CITY A	STATE A	ZIP CODE A
Assista	nt Treasurer	Telephone number 703	6212711
Banks or Other Deposite safety deposit boxes or management of Bank, Depository	aintains funds.	the committee deposits funds, ho	lds accounts, rents
safety deposit boxes or management of Bank, Depository	aintains funds. v, etc.	the committee deposits funds, ho	lds accounts, rents
safety deposit boxes or management of Bank, Depository	aintains funds. v, etc. C Bank 808 17th Street, 8th Floor		
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safety deposit boxes or management of Bank, Depository PN Mailing Address Name of Bank, Depository	aintains funds. 7, etc. 808 17th Street, 8th Floor Washington CITY 7, etc.	DC STATE A	20006 _ ZIP CODE &